# **STATE OF MAINE**

## APPLICATION FOR A RADIOACTIVE MATERIAL LICENSE FOR ACADEMIC, RESEARCH & DEVELOPMENT AND OTHER LICENSES OF LIMITED SCOPE USE

**INSTRUCTIONS**: This application complies with the license requirements of Section C of the State of Maine Rules Relating to Radiation Protection (SMRRRP). Complete items 1 through 12. Supplemental sheets may be needed for items 5 through 11. Mail the completed application to: Radiation Control Program, 10 State House Station, Augusta, Maine, 04333-0010. Telephone: (207) 287-5676.

orig	e Department of Human Services do gin in admission to, access to, or open formation is available in alternate for	erations of its programs, sei		
<u>1. T</u>	THIS IS AN APPLICATION FOR (	check one)		
	NEW LICENSE		LICE	NSE NUMBER (leave blank)
	RENEWAL of license number >			
	AMENDMENT of license number	r >		
	2. NAME AND MAILING ADDRE	SS OF APPLICANT	3. ADDRESS(ES) WH USED AND/O	ERE MATERIAL WILL BE R STORED.
	PHONE:		PHONE:	
4.	NAME OF PERSON TO BE CONT	ACTED ABOUT THIS API	PLICATION	
	NAME:	PHONE:	EMAIL:	
	items 5 through 11, the requested infly, answer by giving the item number			all items. For any that do not
5.	RADIOACTIVE MATERIAL FOR and mass number for each, B. chemica potentially volatile materials specify v manufacturer, model number, and may	al and/or physical form, and C whether the material will be fro	. maximum amount of possession ee (volatile) or bound (non-volati	n at any one time. NOTES: for le); for sealed sources include
A	A. Radionuclide:	B. For	m of Material:	C. Maximum Activity:
-				

An Emergency Plan must be provided if it is required (C.7.G).

If Financial Assurance is required (C.8.F) then Evidence of Financial Assurance must be provided

**6. PURPOSE FOR WHICH MATERIAL WILL BE USED:** List the specific use or purpose of each radioisotope.

## 7. INDIVIDUALS RESPONSIBLE FOR RADIATION SAFETY PROGRAM

or equivalent along with copy of certification included with application.

We will ensure that the RSO is authorized to stop unsafe operation; and has sufficient time to perform radiation safety duresponsibilities.	ties and
<b>7.2Authorized Users</b> : List the names of all authorized users with the types and quantities of licensed material to be used. A information demonstrating each authorized user is qualified by training and experience to use the requested licensed Complete Form HHE851 for each individual and include any copies of training certification.	
We will ensure that the AU is authorized to stop unsafe operation.	
8. INDIVIDUALS WORKING IN OR FREQUENTING RESTRICTED AREAS (Occupationally Exposed Indiv. Ancillary Personnel)	iduals and
8.1 Initial Training: Must be completed before authorized entry into restricted areas.  A description of the radiation safety training program, including topics covered, groups of workers, assessment of training qualifications of instructors, and the method and frequency of training is submitted.	g,
8.2 Refresher Training:	
We will provide annual refresher training.	
9. FACILITIES AND EQUIPMENT: Describe your facility where the source will be used and/or stored.	
Description and diagram of facility and storage locations meeting the criteria in NUREG-1556, Vol. 7 (Dec 1999).for eac address listed in item 3 is submitted	:h
<ul> <li>10. RADIATION SAFETY PROGRAM: Describe your Radiation Safety Program.</li> <li>10.1 Audit Program:</li> <li>Management will conduct an annual audit of the Radiation Safety Program meeting the criteria in NUREG-1556, Vol. 7 (and maintain the records for three years.</li> </ul>	(Dec 1999)
10.2 Radiation Monitoring Instruments:	
Description of the instrumentation that will be used to perform required surveys is submitted and we reserve the right to u our survey instruments as necessary.	ıpgrade
We will use instruments that meet the radiation monitoring instrument specifications published in NUREG-1556, Vol. 7 (1999) and additionally each survey meter will be calibrated by the manufacturer or other person authorized by the NRC/A perform survey meter calibration.	
<i>OR</i> We will use instruments that meet the radiation monitoring instrument specifications published in NUREG-1556, Vo. (Dec 1999), and, additionally, we will implement the model survey instrument calibration program in NUREG-1556 (Dec 1999);	
10.3 Material Receipt and Accountability:	
A description of procedures for ensuring material accountability is submitted.	
Physical inventories will be conducted at intervals not to exceed 6 months, to account for all sealed sources and devices read and possessed under the license;	received
OR Description of the procedures for ensuring that no sealed sources have been lost, stolen, or misplaced and how often be done are submitted.	this will

7.1 Radiation Safety Officer: Include information demonstrating that the RSO is qualified by training and experience. Form HHE851

Telephone:

Name:

10.4	Occur	pational	Dose:

We have done a prospective evaluation and determined that unmonitored individuals are not likely to receive, in 1 year, a radiation dose in excess of 10% of the allowable limits established in SMRRRP Part D or we will monitor individuals in accordance with the criteria established in NUREG-1556, Vol. 7 (Dec 1999);

**OR** Description of an alternative method for demonstrating compliance with the referenced regulations is submitted.

#### 10.5 Public Dose:

We will ensure that licensed material will be used, transported and stored in such a way that members of the public will not receive more than 1 mSv (100 mrem) in one year, and the dose in any unrestricted area will not exceed 0.02 mSv (2 mrem) in any one hour, from licensed operations.

10.6 Safe Use of Radionuclides and Emergency Procedures:

Safe use and emergency procedures are submitted.

#### 10.7 Surveys:

We will survey our facility and maintain contamination levels in accordance with the survey frequencies and contamination levels published in Appendix Q of NUREG-1556, Vol. 7 (Dec 1999). Leak tests will be performed at intervals approved by the Agency/NRC/AS and specified in the SSD Registration Certificate. Leak tests will be performed by an organization authorized by Agency/NRC/AS to provide leak testing services to other licensees or using a leak test kit supplied by an organization authorized by Agency/NRC/AS to provide leak test kits to other licensees and according to the sealed source or plated foil manufacturer's (distributor's) ands kit supplier's instructions;

- *OR* We will survey our facility and maintain contamination levels in accordance with the survey frequencies and contamination levels published in Appendix Q of NUREG-1556, Vol. 7 (May 1998) and we will implement the model leak test program published in Appendix R to NUREG-1556, Vol. 7 (Dec 1999);
- **OR** Description of alternative equipment and/or procedures to evaluate a radiological hazard and for determining whether there is radioactive leakage from sealed sources or plated foil is submitted.

### 10.8 Transportation:

We will develop, implement, and maintain safety programs for transport of radioactive material to ensure compliance with Agency/NRC/AS and DOT regulations.

### 11. LABORATORY ANIMAL AND VETERINARY MEDICINE USES:

We will use the model Laboratory Animal and Veterinary Medicine Uses procedures published in Appendix H to NUREG-1556, Vol. 7 (Dec 1999);

**OR** This article is Not Applicable

## 12. WASTE MANAGEMENT:

We will use the model waste procedures published in Appendix T to NUREG-1556, Vol. 7 (Dec 1999);

OR We will use the Decay-In-Storage model waste procedures published in Appendix T to NUREG-1556, Vol. 7 (Dec 1999)

**OR** We will use the *Disposal of Liquids Into Sanitary Sewerage* model waste procedures published in Appendix T to NUREG-1556, Vol. 7 (Dec 1999)

13. CERTIFICATION: The applicant and any official executing this certificate on behalf of the applicant named in item 2, certify that this application is prepared in conformity with the State of Maine Rules Relating to Radiation Protection and that all information contained herein, including any supplements attached hereto, is true and correct to the best of our knowledge and belief.

DATE:	SIGNATURE OF APPLICANT:		
TITLE:	TYPED/PRINTED NAME:		